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04/07/2004

STETINA BRUNDA GARRED & BRUCKER  
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Andrea K. Levine	(Depositor's name)
Andrea K. Levine	(Signature)
5/3/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/054,124	01/22/2002	Jeffrey Alan Miks	AMKOR-003A	6418

TITLE OF INVENTION: ~~SEMICONDUCTOR PACKAGE INCLUDING RINGS STRUCTURE CONNECTED TO LEADS WITH VERTICALLY DOWNSET INNER ENDS~~  
 SEMICONDUCTOR PACKAGE INCLUDING RING STRUCTURE CONNECTED TO LEADS WITH VERTICALLY DOWNSET INNER ENDS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	07/07/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
WILLIAMS, ALEXANDER O	2826	257-666000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Amkor Technology, Inc.

Chandler, Arizona

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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☒ Issue Fee☒ A check in the amount of the fee(s) is enclosed.☐ Publication Fee☐ Payment by credit card. Form PTO-2038 is attached.☐ Advance Order - # of Copies \_\_\_\_\_☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

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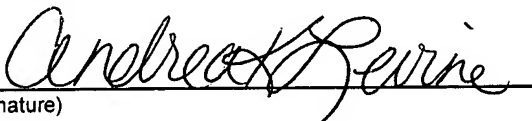
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